

SilverPath Medicare Advantage

Electronic Remittance Advice

Remittance Date: 04/08/2026

Check/EFT: SPA-EFT-20260408-0047

Provider NPI: 1234567893

PATIENT: Holloway, Margaret | Member: SPA-00291847

Claim Ref: CLM-REF-20260218-9931 | DOS: 02/14/2026

J1560 80 units \$4,800.00 PAID \$0.00 CO-97

99600 1 unit \$185.00 PAID \$0.00 CO-97

99603 2 units \$260.00 PAID \$0.00 CO-97

J7030 3 units \$90.00 PAID \$0.00 CO-97

J0171 1 unit \$35.00 PAID \$0.00 CO-97

A4221 1 unit \$770.00 PAID \$0.00 CO-97

TOTAL BILLED: \$6,140.00 | TOTAL PAID: \$0.00

CO-97: Benefit not assigned.